

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	GELLAN GUM BASED ORAL CONTROLLED RELEASE DOSAGE FORMS - A NOVEL PLATFORM TECHNOLOGY FRO GASTRIC RETENTION
Attorney Docket Number::	HOIKHMAN1
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	2
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor

Primary Citizenship Country::	Israel
Status::	Full Capacity
Given Name::	David
Middle Name::	
Family Name::	HOIKHMAN
Name Suffix::	
City of Residence::	Hadera
State or Province of Residence::	
Country of Residence::	Israel
Street of Mailing Address::	Eilat St. 10a
City of Mailing Address::	Hadera
State or Province of Mailing Address::	
Country of Mailing Address::	Israel
Postal or Zip Code of Mailing Address::	38494
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israel
Status::	Full Capacity
Given Name::	Yoram
Middle Name::	
Family Name::	SELA
Name Suffix::	
City of Residence::	Raanana
State or Province of Residence::	
Country of Residence::	Israel
Street of Mailing Address::	Hadas St. 3a
City of Mailing Address::	Raanana
State or Province of Mailing Address::	
Country of Mailing Address::	Israel
Postal or Zip Code of Mailing Address::	43263
Correspondence Information	
Correspondence Customer Number::	001444
Representative Information	
Representative Customer Number::	001444

Domestic Priority Information

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
This Application	National Stage of	PCT/IL04/000654	07-19-04
PCT/IL04/000654	Appln claiming benefit of 35 USC 119(e)	60/488,421	07-21-03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
-----------	----------------------	---------------	--------------------

Assignment Information

Assignee Name::	BIO DAR LTD.
Street of Mailing Address::	P.O. Box 344
City of Mailing Address::	Yavne
State or Province of Mailing Address::	
Country of Mailing Address::	Israel
Postal or Zip Code of Mailing Address::	81103